Case 17-01637 Doc 1 Filed 01/19/17 Entered 01/19/17 16:18:47 Desc Main

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Fill in this information to identify your case:		
United States Bankruptcy Court for the :		
NORTHERN District ofILLINOIS(State)		
Case Number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	Amanda First name Rose	First name
	your driver's license or passport).	Middle name	Middle name
	Diamondatas	Gardner	
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security	XXX - XX - <u>6441</u>	XXX - XX
	number or federal Individual Taxpayer Identification number	OR	OR
	identification number	9xx - xx	9xx - xx

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Document Gardner Amanda Rose Debtor 1 Case Number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	Business name EIN EIN	Business name Business name EIN EIN
5.	Where you live		If Debtor 2 lives at a different address:
		4716 W. 106th place Number Street Unit 3C	Number Street
		Oak Lawn IL 60453 City State ZIP Code COOK County	City State ZIP Code County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for bankruptcy.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		have another reason. Explain. (See 28 U.S.C. § 1408	I have another reason. Explain. (See 28 U.S.C. § 1408

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Debtor 1

Amanda Rose Document Gardner

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Case Number (if known)

Pa	Tell the Court About Your	Bankruptcy	Case			
7.	The chapter of the Bankruptcy Code you are choosing to file		Bankruptcy (Form 2010)		Required by 11 U.S.C. § 342(b) for Individuals of page 1 and check the appropriate box.	
	under	☐ Chap				
		☐ Chap				
		☐ Chap				
8.	How you will pay the fee	I will local yours subm with a local and the subm with a local local local local local local local local pay to the subm local	pay the entire fee will court for more details self, you may pay with a pre-printed address of to pay the fee in in cation for Individuals usest that my fee be will will a judge may, but it than 150% of the official course.	s about how you may h cash, cashier's che on your behalf, your a s. stallments. If you ch to Pay The Filing Fe vaived (You may requ s not required to, wa cial poverty line that a s). If you choose this	on. Please check with the clerk's office in your may pay. Typically, if you are paying the fee eck, or money order. If your attorney is attorney may pay with a credit card or check choose this option, sign and attach the ee in Installments (Official Form 103A). Quest this option only if you are filing for Chapter 7. aive your fee, and may do so only if your income is a applies to your family size and you are unable to soption, you must fill out the Application to Have the 03B) and file it with your petition.	
9.	Have you filed for bankruptcy within the last 8 years?	■ No	District None District None	When _	Case Number MM / DD / YYYY Case Number MM / DD / YYYY Case Number MM / DD / YYYY	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate?	■ No	District	When _	Relationship to you Case Number, if known MM / DD / YYYYY Relationship to you Case Number, if known MM / DD / YYYYY	
11.	Do you rent your residence?	■ No. □ Yes.	residence?	2. al Statement About an l	ment against you and do you want to stay in your n Eviction Judgment Against You (Form 101A) and file it with	

Debtor 1 Amanda Rose Document Gardner Page 4 of 59

Case Number (if known) ______

12.	Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a	■ No. □ Yes.	Go to Part 4. Name and location of l	business	
	business you operate as an individual, and is not a separate legal entity such as		Name of business, if any		
	a corporation, partnerhsip, or LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition.		Number Street		
	to and poulon.		City		State Zip Code
			Check the appropriate	box to describe your business:	
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(2	7A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 10	(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))	
			☐ None of the above	/e	
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	_	the Bankruptcy Code.	11, but I am NOT a small business de	-
Par	Report if You Own or Hav	e Any Hazard	lous Property or Any Prop	perty That Needs Immediate Attention	
				•	
14.	Do you own or have any property that poses or is	No.			
	alleged to pose a threat of imminent and	Yes.	What is the hazard?		
	indentifiable hazard to				
	public health or safety?				
	Or do you own any property that needs immediate attention?		If immediate attention is	needed, why is it needed?	
	Or do you own any property that needs		If immediate attention is	needed, why is it needed?	
	Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building		If immediate attention is Where is the property?		
	Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building				
	Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building				State ZIP Code

Document

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a Joint Case):

Debtor 1

Amanda

Rose

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:	About Debtor 2 (Spouse Only in
You must check one:	You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

uays.	
	ed to receive a briefing about ing because of:
Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	bout
credit counseling because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Amanda Rose Document Gardner Page 6 of 59

Case Number (if known)

	What kind of debts do you have?		consumer debts? Consumer debts are def primarily for a personal, family, or household p	
		Yes. Go to line 17.		
			business debts? Business debts are debts stment or through the operation of the busines	-
		No. Go to line 16c. Yes. Go to line 17.		
		_	we that are not consumer debts or business d	ebts.
	Are you filing under Chapter 7?	No. I am not filing under Ch	papter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and		er 7. Do you estimate that after any exempt p s are paid that funds will be available to distrib	
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	 ∐Yes.		
	How many creditors do	1-49	1,000-5,000	25,001-50,000
	you estimate that you	□ 50-99	5,001-10,000	50,001-100,000
	owe?	☐ 100-199 ☐ 200-999	☐ 10,001-25,000	☐ More than 100,000
	How much do you	\$0-\$50,000	\$1,000,001-\$10 million	□\$500,000,001-\$1 billion
	estimate your assets to	\$50,001-\$100,000	\$10,000,001-\$50 million	□\$1,000,000,001-\$10 billion
	be worth?	\$100,001-\$500,000	\$50,000,001-\$100 million	\$10,000,000,001-\$50 billion
_		\$500,001-\$1 million	\$100,000,001-\$500 million	More than \$50 billion
	How much do you estimate your liabilities	□ \$0-\$50,000 ■ \$50,001-\$100,000	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion
	to be?	\$50,001-\$100,000 \$100,001-\$500,000	\$50,000,001-\$50 million	\$1,000,000,001-\$10 billion
		\$500,001-\$300,000	\$100,000,001-\$500 million	☐ More than \$50 billion
ırt	7. Sign Below			
r y	rou	I have examined this petition, and correct.	I declare under penalty of perjury that the infor	mation provided is true and
		•	ter 7, I am aware that I may proceed, if eligible inderstand the relief available under each chap	*
		, .	did not pay or agree to pay someone who is nd read the notice required by 11 U.S.C. § 342(, ,
		I request relief in accordance with	the chapter of title 11, United States Code, spo	ecified in this petition.
		-	nent, concealing property, or obtaining money n fines up to \$250,000, or imprisonment for up 3571.	
		/s/ Amanda Rose Gard		ure of Debtor 2
		3.gataro 61 200101 1	Signal	
		Executed on01/16/2017	, Execu	

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Debtor 1	Amanda	Rose	Gardner	Case Number (if known)
	First Name	Middle Name	Last Name	
		I the attorney for the	ne debtor(s) named in this n	petition, declare that I have informed the debtor(s) about eligibility to

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

x /s/ Merid Teklehaimanot Mekonnen	Date	Date: 01/19/2	U1 <i>1</i>
Signature of Attorney for Debtor		MM / DD / YYYY	
Merid Teklehaimanot Mekonnen			
Printed name			-
Geraci Law L.L.C.			
Firm name			=
55 E. Monroe St., #3400			
			-
Chicago	IL	60603	
Chicago	ILState	60603 ZIP Code	
Chicago City Contact Phone 312-332-1800	State		ıcilaw.com
City	State	ZIP Code	<u>ıcilaw.c</u> om

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Fill in this information to identify your case:					
Debtor 1	Amanda	Rose	Gardner		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
		the : <u>NORTHERN</u> District of	ILLINOIS_ (State)		
Case Number (If known)			_		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1:	Summarize Your Assets	
		Your assets Value of what you own
	e A/B: Property (Official Form 106A/B) y line 55, Total real estate, from Schedule A/B	\$ 0
1ь. Сору	y line 62, Total personal property, from <i>Schedule A/B</i>	\$ 90,687
1с. Сору	y line 63, Total of all property on Schedule A/B	\$ 90,687
Part 2:	Summarize Your Liabilities	
		Your liabilities Amount you owe
	e D: Creditors Who Have Claims Secured by Property (Official Form 106D) v the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$64,842
	e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0 \$25,604
3ь. Сору	the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	Ψ23,004
Part 3:	Summarize Your Liabilities	
	e I: Your Income (Official Form 106I) our combined monthly income from line 12 of Schedule I	\$2,987.12
	e <i>J: Your Expenses</i> (Official Form 106J) our monthly expenses from line 22c of <i>Schedule J</i>	\$2,955.00

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Document Gardner Rose Amanda Case Number (if known) _ Debtor 1 First Name Middle Name Last Name

Part 4:	Answer These Questions for Administrative and Statistical Records		
_	filing for bankruptcy under Chapter 7, 11 or 13? You have nothing to report on this part of the form. Check this box and submit this form to the co	ourt with your other schedules.	
Your famil	d of debt do you have? debts are primarily consumer debts. Consumer debts are those "incurred by an individual primy, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. debts are not primarily consumer debts. You have nothing to report on this part of the form. Corm to the court with your other schedules.	C. § 159.	
	e Statement of Your Current Monthly Income: Copy your total current monthly income from Off 2A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	s 3,697.04	
	e following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> : art 4 of Schedule E/F, copy the following:	Total claim	
9a. Dom	estic support obligations (Copy line 6a.)	\$_0.00	
9b. Taxe	s and certain other debts you owe the government. (Copy line 6b.)	\$_0.00	
9c. Clain	ns for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_0.00	
9d. Stude	ent loans. (Copy line 6f.)	\$_0.00	
	pations arising out of a separation agreement or divorce that you did not report as laims. (Copy line 6g.)	\$_0.00	
9f. Debt	s to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$_0.00	
9g. Tota l	I. Add lines 9a through 9f.	\$_0.00	

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Fill in this in	formation to identify you	ur case and this filing	g:	0 of 59				
Debtor 1	Amanda	Rose	Gardner					
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name					
United States	Bankruptcy Court for the :	NORTHERN District	of <u>ILLINOIS</u>					
Case Number	-		(State)				Check if this	is an
(If known)						а	mended fili	ng
Official F	orm 106A/B							
Schedul	e A/B: Proper	ty						12/15
eategory where esponsible for pages, write yo	you think it fits best. Be supplying correct inforr ur name and case numb	e as complete and ac nation. If more space er (if known). Answe	curate as possible. If two ma e is needed, attach a separate	its in more than one category, rried people are filing together e sheet to this form. On the top e an Interest In	r, both are equa	lly		
01. Do you ow	vn or have any legal or e	quitable interest in a	ny residence, building, land,	or similar property?				
No.	December							
Yes.	Describe		What is the property? Check	call that apply.	Do not deduct	secured claim	ıs or exemptior	ıs. Put
4716 Wes	st 106th Place Unit 3C		Single-family home		the amount of a	any secured c	laims on Sche	dule D:
Street addre	ess, if available, or other desc	cription	Duplex or multi-unit building	9				
			Condominium or cooperativ		Current value entire propert		Current val	
0.1.1			Manufactured or mobile ho	me		-	po	
Oak Lawr City		IL 60453 tate ZIP Code	Land Investment property		\$	63,681.00	\$	63,681.00
,	_		Timeshare		Deceribe the	mat af		
County			Other		Describe the interest (such	=		-
			Who has an interest in the p	property? Check one.	the entireties,	, or a life es	tat), if knowr	1.
			Debtor 1 only					
			Debtor 2 only					
			Debtor 1 and Debtor 2 only				nmunity prop	perty
			At least one of the debtors	and another	(see instru	uctions)		
			Other information you wish property identification numl	to add about this item, such a ber:24-15-115-020-101				
2 Add the del	llar value of the portion v	you own for all of you	ur entries fro Part 1, including	a any entries for pages				
		=		Jany entities for pages	>			\$63,681.00
	Describe Your Vehicles							400,0000
Do you own, le	ease, or have legal or eq	u lease a vehicle, also	o report it on Schedule G: Exe	registered or not? Include any ecutory Contracts and Unexpired				
Yes.	Describe	Disconder.						
	Лake: Лodel:	Hyundai Tucson	Who has an interest in the p Debtor 1 only	property? Check one.	Do not deduct sthe amount of a	any secured c	laims on Scheo	dule D:
	/ear:	2013	Debtor 2 only		Current value			
		60,000	Debtor 1 and Debtor 2 only	,	Current value entire propert		Current val portion you	
	Approximate Mileage:		At least one of the debtors	and another	•	10,850.00	•	10,850.00
с Г	Other information:		Check if this is communinstructions)	nity property (see	\$		\$	10,030.00
			<u> </u>					

Debtor 1 Amanda Case 17-01637

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Middle Name

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	No. Yes.	Boats, trailers, mot	homes, ATVs and other recreational vehicles, other vehicles, and accessories ors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories		
			oortion you own for all of your entries fro Part 2, including any entries for pages 2. Write that number here		\$ 10,850.00
	you nave at	tached for r art i	. Wite that number nere		
	Part 3:	escribe Your Pe	rsonal and Household Items		
Do	o you own or	have any legal	or equitable interest in any of the following items?	Current value portion you on Do not deduct se or exemptions	wn?
06		l goods and furr Major appliances, t	nishings furniture, linens, china, kitchenware		
	Yes.	Describe	Furniture, linens, small appliances, table & chairs, bedroom set \$1,000	\$_	1,000.00
07.		Televisions and ra	dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games		
	Yes.	Describe	3 TV, computer, tablet, cell phone \$1,000	\$	1,000.00
	stamp, coin No. Yes.	Antiques and figuri	nes; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles hobbies	\$_	0.00
	and kayaks	; carpentry tools; n	nic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes nusical instruments		
	Yes.	Describe		\$_	0.00
10	Examples:		guns, ammunition, and related equipment	_	
	Yes.	Describe		\$_	0.00
11.	Examples:	Everyday clothes,	furs, leather coats, designer wear, shoes, accessories		
	Yes.	Describe	Everyday clothes, Winter Coats, shoes, accessories \$250	\$_	250.00
12.	Examples: gold, silver	Everyday jewelry, (costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	_	
	Yes.	Describe	Everyday jewelry and costume jewelry \$250	\$_	250.00
13.	. Non-farm a			_	
	Examples: No.	Dogs, cats, birds, h	norses		
	Yes.	Describe		٦	

Debtor 1

Amanda Case 17-01637

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Desc Main

Middle Name

14.	Any other No.	personal and h	ousehold items you did not alread	ly list, including any health aids you did not list			
	Yes.	Describe	Books, CDs, DVDs & Family Photos		\$275	\$	275.00
			of your entries from Part 3, includ	ling any entries for pages you have attached			\$2,775.00
	Part 4:	Describe Your Fir	nancial Assets				
Do	you own o	r have any legal	or equitable interest in any of the	e following?		Current value or portion you own Do not deduct sector exemptions	1?
16.	Cash Examples: No. Yes.	Money you have in	n your wallet, in your home, in a safe dep	posit box, and on hand when you file your petition			
17.		Checking, savings	s, or other financial accounts; certificates If you have multiple accounts with the sa	of deposit; shares in credit unions, brokerage houses, ame institution, list each.		\$	0.00
	Yes.	Describe	Account Type: Checking Account Savings Account Checking Account	Institution name: Chase Bank Chase Bank Chase Bank		\$ \$ \$	0.00 0.00 18.00
18.	Examples:	Bond funds, inves	publicly traded stocks tment accounts with brokerage firms, mo	oney market accounts		\$	<u>18.0</u> 0
19.		Describe	Institution or issuer name:	d unincorporated businesses, including an interest in		\$	0.00
	No. Yes.	Describe	Name of Entity and Percent of Ow	mership:		\$	0.00
20.	Negotiable	instruments includ	te bonds and other negotiable and de personal checks, cashiers' checks, pro tre those you cannot transfer to someone	omissory notes, and money orders.			
	Yes.	Describe	Issuer name:			\$	0.00
21.		t or pension acc Interests in IRA, E		gs accounts, or other pension or profit-sharing plans			
	Yes.	Describe	Type of account and Institution nat	me: LPL Financial		\$ \$	7,719.00 7,719.00
22.	Your share		payments osits you have made so that you may cor andlords, prepaid rent, public utilities (ele				
	Yes.	Describe	Institution name or individual:			\$	0.00
23.	No.	Describe	a periodic payment of money to you	ou, either for life or for a number of years)			
24.	Interests in	n an education l		BLE program, or under a qualified state tuition program.		\$	0.00
	No. Yes.			Separately file the records of any interests.11 U.S.C. § 521(c):		\$	0.00

Debtor 1 Amanda Case 17-01637 Rose

Doc 1

Desc Main

SULUI	 / IIIIaiiaa	

Middle Name

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Cardner
Cardner
Last Name
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Entered 01/19/17 16:18:47 Page 13 of 59 umber (if known)

25.	Trusts, equ	uitable or future	interests in property (other than anything listed in line 1), and rights or powers		
	Yes.	Describe			
26	Patents co	onvrights trade	marks, trade secrets, and other intellectual property	\$	0.00
20.			mes, websites, proceeds from royalties and licensing agreements		
	Yes.	Describe		\$	0.00
27.			other general intangibles	-	
		Building permits, e	xclusive licenses, cooperative association holdings, liquor licenses, professional licenses		
	No.	Describe			
	res.	Describe		\$	0.00
Мо	ney or prop	erty owed to yo	u?	Current value of portion you own Do not deduct secuor exemptions	?
28.	Tax refund	ls owed to you			
	Yes.	Describe	Anticipated tax refund for 2016. \$2,644	\$	2,644.00
29.	Family sup	port		Ψ	
	No.		um alimony, spousal support, child support, maintenance, divorce settlement, property settlement		
	Yes.	Describe	Back Due Child Support \$3,000	\$	3,000.00
30.	Examples: Social Section No.	urity benefits; unpa	wes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, id loans you made to someone else		
	Yes.	Describe		\$	0.00
31.		insurance polic			
		Health, disability, o	r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance		
	No. Yes.	Dogoribo	Company Name & Beneficiary:		
	1es.	Describe		\$	0.00
32.	If you are the		at is due you from someone who has died iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive as died.		
	Yes.	Describe		•	0.00
33.	_		s, whether or not you have filed a lawsuit or made a demand for payment ment disputes, insurance claims, or rights to sue	\$	0.00
	Yes.	Describe			
34.	Other cont	tingent and unli	quidated claims of every nature, including counterclaims of the debtor and rights	\$	0.00
	Yes.	Describe			0.00
35.	Any financ	cial assets you d	id not already list	\$	0.00
	Yes.	Describe		\$	0.00
			of your entries from Part 4, including any entries for pages you have attached		\$13,381.00
	tor Part 4. \	vrite that numb	er here>	<u> </u>	, , - , -

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Document Page 14 of 59 umber (if known) Case 17-01637 Doc 1 Desc Main Amanda Debtor 1 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Yes. Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned No. Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Describe..... 0.00 41. Inventory No. Describe..... 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations Yes. Describe..... 0.00 44. Any business-related property you did not already list No. Yes. Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Yes. Describe..... 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Describe..... Yes. 0.00 48. Crops-either growing or harvested No.

Schedule A/B: Property

0.00

0.00

Page 5 of 6

Yes.

No. Yes.

Official Form 106A/B

Describe.....

Describe.....

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

Record # 718652

Debtor 1 Amanda Case 17-01637 Doc 1 Filed 01/19/17 Entered 01/19/17 16:18:47 Desc Main Page 15 of 5 d window (if known) Page 15 of 5

50. Farm and fishing supplies, chemicals, and feed No.		
Yes. Describe		\$ 0.00
51. Any farm- and commercial fishing-related property you did not already list	<u> </u>	\$ <u>0.0</u> 0
No. Yes. Describe		
		\$0.00
52. Add the dollar value of all of your entries from Part 6, including any entries for Part 6. Write that number here		\$0.00
Part 7: Describe All Property You Own or Have an Interest in That You Did N	lot List Above	
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership		
No. Yes. Describe		
		\$0.00
54. Add the dollar value of all of your entries from Part 7. Write that number he	ere>	\$0.00
Part 8: List the Totals of Each Part of this Form		
55. Part 1: Total real estate, line 2		\$ 63,681.00
56. Part 2: Total vehicles, line 5	\$ 10,850.00	
57. Part 3: Total personal and household items, line 15	\$ 2,775.00	
58. Part 4: Total financial assets, line 36	\$ 13,381.00	
59. Part 5: Total business-related property, line 45	\$ 0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00	
61. Part 7: Total other property not listed, line 54	\$ 0.00	
62. Total personal property. Add lines 56 through 61	\$ 27,006.00	\$ 27,006.00
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$90,687.00

Fill in this in	nformation to identif		
Debtor 1	Amanda	Rose	Gardner
	First Name	Middle Name	Last Name
Debtor 2	-		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	s Bankruptcy Court for the	ne : <u>NORTHERN</u> District of _	ILLINOIS(State)
Case Number	r		
(If known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. Which set of exc	emptions are you claiming? Check	k one only, even if your spo	ouse is filing with you.	
_	ming state and federal nonbankrupt	•	§ 522(b)(3)	
You are clair	ming federal exemptions. 11 U.S.C.	§ 522(b)(2)		
2. For any propert	y you list on <i>Schedule A/B</i> that yo	u claim as exempt, fill in t	the information below.	
•	n of the property and line on hat lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	4716 West 106th Place Unit 3C Oak Lawn IL 60453 - Primary Residence	\$_63,681	\$15,000	735 ILCS 5/12-901 - \$15,000.00
Line from Schedule A/B:	01		100% of fair market value, up to any applicable statutory limit	
Brief description:	2013 Hyundai Tucson with over 60,000 miles	\$_10,850	\$ _ 2,400	735 ILCS 5/12-1001(c) - \$2,400.00
Line from Schedule A/B:	03		100% of fair market value, up to any applicable statutory limit	
Brief description:	Furniture, linens, small appliances, table & chairs, bedroom set	\$ <u>1,000</u>		735 ILCS 5/12-1001(b) - \$1,000.00
Line from Schedule A/B:	06		100% of fair market value, up to any applicable statutory limit	
Brief description:	3 TV, computer, tablet, cell phone	\$_1,000		735 ILCS 5/12-1001(b) - \$1,000.00
Line from Schedule A/B:	07		100% of fair market value, up to any applicable statutory limit	
Official Form 106C	Record # 718652	Schedule C: T	he Property You Claim as Exempt	Page 1 of 3

Debtor 1 Amanda First Name

Rose

Middle Name

Document Last Name

Page 17 of 59 Number (if known)

Additional Page Part 2:

description: shoe Line from Schedule A/B: 11 Brief Even description: jewel Line from Schedule A/B: 12 Brief Book description: Phote Line from Schedule A/B: 14 Brief Chec description: 0.00 Line from Schedule A/B: 17	yday jewelry and costume lry ss, CDs, DVDs & Family os sking Account, Chase Bank,	\$\frac{250}{\$275}\$	Check only one box for each exemption \$ 100% of fair market value, up to any applicable statutory limit \$ 100% of fair market value, up to any applicable statutory limit \$ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b) - \$250.00 735 ILCS 5/12-1001(a),(e) - \$250.00 735 ILCS 5/12-1001(a) - \$275.00
description: shoe Line from Schedule A/B: 11 Brief Even description: jewel Line from Schedule A/B: 12 Brief Book description: Phote Line from Schedule A/B: 14 Brief Chec description: 0.00 Line from Schedule A/B: 17	s, accessories yday jewelry and costume lry ss, CDs, DVDs & Family os sking Account, Chase Bank,	\$ <u>250</u>	100% of fair market value, up to any applicable statutory limit \$ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a),(e) - \$250.00 735 ILCS 5/12-1001(a) - \$275.00
Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Brief Dook Description: Line from Schedule A/B: Line from Schedule A/B: Brief Description: Line from Schedule A/B: Line from Schedule A/B:	yday jewelry and costume lry ss, CDs, DVDs & Family os sking Account, Chase Bank,		any applicable statutory limit \$ 100% of fair market value, up to any applicable statutory limit \$	735 ILCS 5/12-1001(a) - \$275.00
description: jewel Line from Schedule A/B: 12 Brief Book description: Photo Line from Schedule A/B: 14 Brief Chec description: 0.00 Line from Schedule A/B: 17	is, CDs, DVDs & Family os		100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a) - \$275.00
Schedule A/B: 12 Brief Book Phote Line from Schedule A/B: 14 Brief Chec description: 0.00 Line from Schedule A/B: 17	cs, CDs, DVDs & Family os	\$ <u>275</u>	any applicable statutory limit	
description: Phote Line from Schedule A/B: Brief Chec description: 0.00 Line from Schedule A/B: 17	os	\$ <u>275</u>	_	
Schedule A/B: 14 Brief Chec Chec Chec Chec Chec Chec Chec Chec	cking Account, Chase Bank,		100% of fair market value, up to	
description: 0.00 Line from Schedule A/B: 17			any applicable statutory limit	
Schedule A/B: 17		\$_0		735 ILCS 5/12-1001(b) - \$0.00
Brief Savir	_		100% of fair market value, up to any applicable statutory limit	
description: 0.00	ngs Account, Chase Bank ,	\$ <u>0</u>		735 ILCS 5/12-1001(b) - \$0.00
Line from Schedule A/B: 17			100% of fair market value, up to any applicable statutory limit	
Brief Checodescription: 18.00	cking Account, Chase Bank,	\$ <u>18</u>		735 ILCS 5/12-1001(b) - \$18.00
Line from Schedule A/B: 17			100% of fair market value, up to any applicable statutory limit	
Brief IRA, description:	LPL Financial, 7,719.00	\$_ 7,719	 \$	735 ILCS 5/12-1006 - \$7,719.00
Line from Schedule A/B: 21			100% of fair market value, up to any applicable statutory limit	
Brief Antic	ipated tax refund for 2016.	\$_2,644		735 ILCS 5/12-1001(g)(1)(2)(3) - \$1,000.00 735 ILCS 5/12-1001(b) - \$1,644.00
Line from Schedule A/B: 28			100% of fair market value, up to any applicable statutory limit	
Brief Back description:	Due Child Support	\$_3,000	 \$	735 ILCS 5/12-1001(g)(4) - \$3,000.00
Line from Schedule A/B: 29	_		100% of fair market value, up to any applicable statutory limit	

Debtor 1 Amanda Rose Document Page 18 of 59 Case Number (if known)

Last Name

Middle Name

First Name

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
3. Are you claiming a homestead exemption of m	ore than \$155,675?		
(Subject to adjustment on 4/01/16 and every 3 y	ears after that for cases filed o	n or after the date of adjustment .)	
No.			
Yes. Did you acquire the property covered b	y the exemption within 1,215 d	lays before you filed this case?	
No			
Yes.			
Official Form 1060 Percent # 718652	Cahadula C. T	ha Duananti Vari Claim as Evanut	Page 3 of 3

Fill in this in	Caso 17 O		1 Filed 01/10/17	Entered 01/19/ 9 of 59	17 16:18:47	Desc Main	
	-	•		9 01 39			
Debtor 1	Amanda	Rose	Gardner				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the	· NORTHERN Dis	etrict of ILLINOIS				
Officed States	Bankruptcy Court for the	. <u>NORTHERN</u> Dis	(State)			Check if this	e ie an
Case Number (If known)	ſ					amended fi	
Official F	orm 106D					a	9
		Who Have C	laims Secured by F	Property			12/1
Be as complete	and accurate as pos	sible. If two married	people are filing together, both	are equally responsible f			
	nore space is needed es, write your name ar		al Page, fill it out, number the er known).	itries, and attach it to this	form. On the top of a	ny	
1. Do any cre	ditors have claims se	cured by your prop	erty?				
No. Ch	neck this box and subn	nit this form to the co	ourt with your other schedules. Yo	ou have nothing else to repo	ort on this form.		
Yes. Fil	II in all of the information	on below.					
Part 1:	List All Secured Claims	3					
2. List all se	cured claims. If a cred	ditor has more than o	one secured claim, list the creditor	r separately	Column A	Column A	Column C Unsecured
for each cl	laim. If more than one	creditor has a partic	cular claim, list the other creditors	in Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	portion
As much a	as possible, list the clai	ims in alphabetical o	rder according to the creditors na	ime.	value of collateral	claim	If any
2.1 Chase	AUTO		Describe the property that secure	es the claim:	\$ _13,892.00	\$ 10,850.00	\$ <u>3,042.00</u>
Creditor's			2013 Hyundai Tucson with over	60,000 miles			
	901003						
Number	Street						
			As of the date you file, the claim i	is: Check all that apply.			
Ft Wort	h T	X 76101	Contingent Unliquidated				
City	S	State Zip Code	Disputed				
Who owes	s the debt? Check one.		Nature of Lien. Check all that apply	٧.			
Debtor	1 only		An agreement you made (such as				
Debtor	2 only		car loan)				
Debtor	1 and Debtor 2 only		Statutory lien (such as tax lien, m	echanic's lien)			
At least	one of the debtors and a	nother	Judgment lien from a lawsuit				
Check	if this claim relates to	a	Other (including a right to offset)				
	unity debt	15-09-04		0901			
	was incurred201		Last 4 digits of account number		• 7 F00 00	• 0.00	7 500 00
	Housing Development	Authority	Describe the property that secure		\$_7,500.00	\$ <u>0.00</u>	\$ <u>7,500.00</u>
Creditor's 111 E L	Name Jpper Wacker Dr Ste 1	000	4716 West 106th Place Unit 3C Primary Residence	Oak Lawn IL 60453 -			
Number	Street		Filliary Residence				
			As of the date you file, the claim i	is: Check all that apply.			
			Contingent	,			
Chicago			Unliquidated				
City	S	State Zip Code	Disputed				
Who owes	s the debt? Check one.		Nature of Lien. Check all that apply	у.			
Debtor	•		An agreement you made (such as	s mortgage or secured			
☐ Debtor	•		car loan)	and anials Rank			
=	1 and Debtor 2 only tone of the debtors and a	nother	Statutory lien (such as tax lien, m Judgment lien from a lawsuit	iechanic's lien)			
☐ At least	. cc or the debitors and a		Other (including a right to offset)				
	if this claim relates to a	a					
	was incurred201	14	Last 4 digits of account number				
		 ntries in Column A o	on this page. Write that number		\$_21,392.00		

Debtor 1 Amanda Rose Document Page 20 of 59 Case Number (if known)

Par	Additional Page After Isiting any en by 2.4, and so forth		number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral	Column A Value of collateral that supports this claim	Column C Unsecured portion If any
2.3	US Bank Home Mortgage	:	Describe the property that secures the claim:	\$ 43,450.00	\$ <u>63,681.00</u>	\$ <u>0.00</u>
	Creditor's Name 4801 Frederica St Number Street		4716 West 106th Place Unit 3C Oak Lawn IL 60453 - Primary Residence			
	Owensboro City	KY 42301 State Zip Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
	Who owes the debt? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	ne.	Nature of Lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the debtors and Check if this claim relates community debt		Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 7966			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$_64,842.00

Fill in thi	Caso 17		Filed 01/10/17	Entered 01/19/17 16:18:47 1 of 59	Desc Main	
		, , ,		1 01 59		
Debtor 1	Amanda	Rose	Gardner			
D-h40	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if fili	ing) First Name	Middle Name	Last Name	•		
United St	ates Bankruptov Court for th	ne : <u>NORTHERN</u> Distri	ct of JULINOIS			
Officed Sc	ates Bankruptcy Court for ti	ie . <u>NORTHERN</u> Distit	(State)		Check if this is an	
Case Nur (If known)					amended filing	
Official	Form 106E/F				3	
		<u>-</u>	Unsecured Claims		12/1	15
ist the othe I/B: Proper reditors wi eeded, cop	er party to any executo ty (Official Form 106A/I ith partially secured cla by the Part you need, fil dditional pages, write y	ry contracts or unexpire B) and on Schedule G: ims that are listed in Sc	ed leases that could result in Executory Contracts and Une chedule D: Creditors Who Ha ries in the boxes on the left. I	is and Part 2 for creditors with NONPRIORITY c a claim. Also list executory contracts on Schec expired Leases (Official Form 106G). Do not inc ve Claims Secured by Property. If more space i Attach the Continuation Page to this page. On the	dule dude any is	
1. Do any	creditors have priority	unsecured claims agai	nst you?			
No.	Go to Part 2.					
Yes	S .					
each cla nonprio unsecu	aim listed, identify what ority amounts. As much a red claims, fill out the Co	type of claim it is. If a cla as possible, list the claim ontinuation Page of Part	aim has both priority and nonposes in alphabetical order according	secured claim, list the creditor separately for each riority amounts, list that claim here and show both ing to the creditor's name. If you have more than to olds a particular claim, list the other creditors in Parauction booklet.)	priority and two priority	
				Total claim	Priority Nonpriority amount amount	
Part 2:	List All of Your NONF	RIORITY Unsecured Clai	ms			
3. Do any	creditors have nonprior	ority unsecured claims a	ngainst you?			_
∏ No.	You have nothing to re	port in this part. Submit	this form to the court with you	r other schedules.		
Yes	S.		,			
nonprio include	ority unsecured claim, lis	t the creditor separately one creditor holds a part	for each claim. For each claim	or who holds each claim. If a creditor has more to listed, identify what type of claim it is. Do not list litors in Part 3.If you have more than three nonpride	claims already	
Adv	ocate Christ Medical Ce	enter .			Total claim \$ 255.00	
Credi	itor's Name		ast 4 digits of account number		Ψ_200.00	
PO Numi	Box 70508 ber Street	v	/hen was the debt incurred?			
Num	bei Greet	Δ	s of the date you file, the claim	is: Check all that apply		
			Contingent	ones and a apply		
Chic City	cago	IL 60673-0508 State Zip Code	Unliquidated			
	wes the debt? Check one		Disputed			
=	btor 1 only	_				
	btor 2 only	T F	ype of NONPRIORITY unsecure Student loans	ed claim:		
=	btor 1 and Debtor 2 only least one of the debtors and	l another	Obligations arising out of a sepa	aration agreement or divorce		
=	eck if this claim relates t		that you did not report as priority			
Col	mmunity debt		Debts to pension or profit-sharing	ng plans, and other similar debts		
Is the	claim subject to offest?	-	Other. Specify Medical/Den	ntal Services		
Yes			Other. SpecifyWedical/Def			

Doc 1 Filed 01/19/17 Entered 01/19/17 16:18:47 Desc Main Case 17-01637 Page 22 of 59 Case Number (if known) **Document** Amanda Rose Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page **Total Claim** After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Advocate Medical Group \$ 94.00 Last 4 digits of account number _ Creditor's Name

PO Box 92523	When was the debt incurred?	
Number Street		
	As of the date you file the claim is. Check all that apply	
	As of the date you file, the claim is: Check all that apply.	
Chicago IL 60675	Contingent	
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another		
Check if this claim relates to a	that you did not report as priority claims	
community debt Is the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
No	M / // // // // // // // // // // // //	
	Other. SpecifyMedical/Dental Services	
Yes A 3 Associated Pathology Consultants		\$ 36.00
4.0	Last 4 digits of account number	\$_30.00
Creditor's Name	When was the debt incurred?	
2634 Solutions Center	when was the debt incurred?	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Chicago IL 60677	Unliquidated	
City State Zip Code	Disputed	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	_	
No	Other. Specify Medical Debt	
Yes		
4.4 CAP1/Bstby	Last 4 digits of account number NULL	<u>\$ 200.00</u>
Creditor's Name		
26525 N Riverwoods Blvd	When was the debt incurred? 2009-2013	
Number Street		
	As of the date you file the claim is. Check all that apply	
	As of the date you file, the claim is: Check all that apply.	
Mettawa IL 60045	Contingent	
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	Condit Cond on Condit 11-	
■ No	Other. Specify Credit Card or Credit Use	
Yes		

Official Form 106E/F

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Page 23 of 59 Case Number (if known) **Document** Amanda Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Capital ONE BANK USA N \$ 3,640.00 Last 4 digits of account number _ Creditor's Name 2008-2016 15000 Capital One Dr When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Richmond 23238 VA Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes CBNA NULL \$ 387.00 Last 4 digits of account number 4.6 Creditor's Name 2009-2014 50 Northwest Point Road When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Elk Grove Village 60007 IL Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify ___ Credit Card or Credit Use Yes Chase CARD NULL \$ 2,094.00 4.7 Last 4 digits of account number Creditor's Name 2011-2016 Po Box 15298 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Wilmington 19850 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce

Check if this claim relates to a community debt

Is the claim subject to offest?

No

that you did not report as priority claims

Other. Specify ___Credit Card or Credit Use

Debts to pension or profit-sharing plans, and other similar debts

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Case Number (if known) **Document** Amanda Rose Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.8	COMENITY BANK/Vctrssec	Last 4 digits of account number NULL	\$ <u>2,125.00</u>
	Creditor's Name Po Box 182789	When was the debt incurred? 2008-2016	
	Number Street	when was the dept incurred:	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Columbus OH 43218	Unliquidated	
Ι,	City State Zip Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
'	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offest?		
	No No	Other. Specify Credit Card or Credit Use	
4.9	Yes Edward Hospital	Last 4 digits of account number	\$ 46.00
4.5	Creditor's Name		·
	801 S. Washington st.	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Name of the United States	Contingent	
	Naperville IL 60566 City State Zip Code	Unliquidated	
'	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
١,	community debt s the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
	No	Other. Specify Medical/Dental Service	
	Yes	Other. Opening	
4.10	Elmhurst Memorial Hospital	Last 4 digits of account number	\$ 975.00
	Creditor's Name	When you the deleter your 10	
	PO Box 4052	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Carol Stream IL 60197	Contingent	
	City State Zip Code	Unliquidated	
	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
'	community debt	Debts to pension or profit-sharing plans, and other similar debts	
!	s the claim subject to offest?	_	
	No	Other. Specify Medical/Dental Service	
	Yes		

Doc 1 Filed 01/19/17 Entered 01/19/17 16:18:47 Desc Main Case 17-01637 Page 25 of 59 Case Number (if known) **Document** Amanda Rose Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Elmhurst Radiologists **\$** 50 00

4.11		Last 4 digits of account number	\$ _00.00
Creditor's Name			
PO Box 1035		When was the debt incurred?	
Number Street			
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
Bedford Park	IL 60499		
City	State Zip Code	Unliquidated	
Who owes the debt?		Disputed	
Debtor 1 only			
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor	2 only	Student loans	
=	•		
At least one of the de		Obligations arising out of a separation agreement or divorce	
Check if this claim	relates to a	that you did not report as priority claims	
community debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to	o offest?		
No		Other. Specify Medical Debt	
Yes			
4.12 Fortiva/Atlanticus		Last 4 digits of account number NULL	<u>\$_511.00</u>
Creditor's Name		2045 2040	
Po Box 105555		When was the debt incurred? 2015-2016	
Number Street			
		As of the date you file, the claim is: Check all that apply.	
Atlanta	GA 30348	Contingent	
City	State Zip Code	Unliquidated	
Who owes the debt?		Disputed	
Debtor 1 only			
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
= '			
Debtor 1 and Debtor	•	☐ Student loans	
At least one of the de	ebtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim	relates to a	that you did not report as priority claims	
community debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to	offest?		
No		Other. Specify Credit Card or Credit Use	
Yes			
4.13 Jennifer Wood Fan	nily Law	Last 4 digits of account number	\$ <u>9,000.00</u>
Creditor's Name			
13400 IL-59 Ste 26	3	When was the debt incurred? 2015	
Number Street			
		As of the date you file, the claim is: Check all that apply.	
Plainfield	IL 60585	Contingent	
		Unliquidated	
City Who owes the debt?	State Zip Code	Disputed	
	onoun ono.		
Debtor 1 only		- (10)	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor	•	Student loans	
At least one of the de	ebtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim	relates to a	that you did not report as priority claims	
community debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to	offest?	_	
No		Other. Specify Attorney's Fees & Notice	
		Outon Opoony	

Record # 718652

Doc 1 Filed 01/19/17 Entered 01/19/17 16:18:47 Desc Main Case 17-01637 Page 26 of 59 **Document** Amanda Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Kohls/Capone \$ 3,026.00 Last 4 digits of account number _ Creditor's Name 2008-2016 N56 W 17000 Ridgewood Dr When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Menomonee Falls WI 53051 Unliquidated Zip Code State Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes \$ 200.00 OAC Last 4 digits of account number Creditor's Name PO Box 371100 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Milwaukee 53237 WI Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify _ Yes Syncb/DISCOUNT TIRE NULL \$ 124.00 Last 4 digits of account number Creditor's Name 2013-2016 Po Box 965036 When was the debt incurred? Number Street

Doc 1 Filed 01/19/17 Entered 01/19/17 16:18:47 Desc Main Case 17-01637 Page 27 of 59 **Document** Amanda Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Syncb/OLD NAVY \$ 891.00 Last 4 digits of account number _ Creditor's Name 2014-2016 Po Box 965005 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent FI 32896 Orlando Unliquidated City Zip Code State Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes Syncb/TJX COS NULL \$ 854.00 Last 4 digits of account number 4.18 Creditor's Name 2013-2016 Po Box 965005 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply.

Contingent Orlando 32896 FL Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify ___ Credit Card or Credit Use Iyes TD BANK USA/Targetcred NULL \$896.00 4.19 Last 4 digits of account number Creditor's Name 2014-2016 Po Box 673 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Minneapolis 55440 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify ___Credit Card or Credit Use

Doc 1 Filed 01/19/17 Entered 01/19/17 16:18:47 Desc Main Case 17-01637 Page 28 of 59 Case Number (if known) **Document** Amanda Debtor 1 First Name \$ 200.00 Village of Oak Lawn 4.20 Last 4 digits of account number Creditor's Name 9446 S. Raymond When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Oak Lawn 60453-2489 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? Other. Specify Fines List Others to Be Notified for a Debt That You Already Listed Part 3: 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. State Collection Service Inc. On which entry in Part 1 or Part 2 list the original creditor? Line __1 of (Check one): Part 1: Creditors with Priority Unsecured Claims 2509 South Stoughton Road Part 2: Creditors with Nonpriority Unsecured Claims Number Madison WI 53716 Last 4 digits of account number ____ ____ City State Zip Code Malcolm S. Gerald and Assoc. On which entry in Part 1 or Part 2 list the original creditor? Line 2 of (Check one): Part 1: Creditors with Priority Unsecured Claims 332 S. Michigan Ave., Ste. 600 Part 2: Creditors with Nonpriority Unsecured Claims Number IL 60604 Chicago Last 4 digits of account number ____ ____ State Zip Code United Collection Bureau, Inc. On which entry in Part 1 or Part 2 list the original creditor? Line 9 _ of (Check one): Part 1: Creditors with Priority Unsecured Claims 5620 Southwyck Blvd., Ste. 206 Part 2: Creditors with Nonpriority Unsecured Claims Number Street OH 43614 Toledo Last 4 digits of account number ____ ____

City

Number

Norwood

City

Credit Collection Services

Street

Name 725 Canton Street

Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

State Zip Code

MA 02062

State Zip Code

Line 10 of (Check one):

On which entry in Part 1 or Part 2 list the original creditor?

Last 4 digits of account number _____ ___

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Schedule E/F: Creditors Who Have Unsecured Claims

Page 29 of 59 **Document** Amanda Rose Debtor 1

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$0.00	
	6b. Taxes and Certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
			Total claim	
Total claims from Part 2	6f. Student loans	6f.	Total claim \$0.00	
	6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority		\$0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims6h. Debts to pension or profit-sharing plans, and other	6g.	\$	

		Caso 17	01627 Doc 1	Filad 01/10/17	Entor	ed 01/19/17	16·18·47	Desc Main	
Fi	ll in this in	formation to identi	ify your case:			0 of 59	10.10.11	Bood Main	
D	ebtor 1	Amanda	Rose	Gardner	_				
D	ebtor 2	First Name	Middle Name	Last Name					
	pouse, if filing)	First Name	Middle Name	Last Name	-				
U	nited States	Bankruptcy Court for	the : <u>NORTHERN</u> District of _	<u>ILLINOIS</u>					
	ase Number f known)			(State)				Check if this amended filir	
Off	icial Fo	orm 106G							
Scł	nedule	G: Executo	ory Contracts and	Unexpired Lea	ses				12/15
3e as	complete	and accurate as p	ossible. If two married peopleded, copy the additional page	e are filing together, bot , fill it out, number the e	th are equal entries, and	ly responsible for su attach it to this page	pplying correct . On the top of a	any	
additi	ional page:	s, write your name	and case number (if known)	•					
1. L	_	-	ontracts or unexpired leases' ubmit this form to the court with		ou have not	hing else to report on	this form		
	_		ation below even if the contract						
_	_ 100:1111				Concado 7	D. Proporty (Omolai	1 01111 100712)		
			r company with whom you ha						
	xample, re nexpired le		cell phone). See the instruction	ns for this form in the inst	truction book	let for more example	s of executory co	ontracts and	
	Person or	company with who	om you have the contract or	ease		State what the	contract or leas	e is for	
2.1	1								
2.1	Name				_				
	Number	Ctroot			_				
	Number	Street							
	City		State Zip	Code	_				
2.2					_				
	Name								
	Number	Street			_				
	City		State Zip	Code	_				
2.3			<u> </u>						
2.0	Name				_				
	Number	Ctroot			_				
	Number	Street							
	City		State Zip	Code	_				
2.4									
	Name				_				
	Number	Street			_				
					_				
	City		State Zip	Code					
2.5					_				
	Name				_				
	Number	Street							

State Zip Code

City

Official Form 106G

Fill in this in	nformation to identif	fy your case:	
Debtor 1	Amanda	Rose	Gardner
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for t	he : <u>NORTHERN</u> District of _	
Case Number	ır		(State)
(If known)			<u> </u>

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

any A	dditional Pag	es, write your name and case	number (if Known). Answ	er every question.	
1. D	o you have a	ny codebtors? (If you are filing	g a joint case, do not list eit	her spouse as a coo	debtor.)
	No. Yes				
		8 years, have you lived in a c rnia, Idaho, Lousiiana, Nevada		• ,	nunity property states and territories include n, and Wisconsin.)
	No. Go to I	ine 3.			
	Yes. Did yo	our spouse, former spouse, or	legal equivalent live with yo	ou at the time?	
	_	nwhich community state or ter	ritory did you live?	Fill	in the name and current address of that person.
	Name of	your spouse, former spouse or legal equ	uivalent	 ,	
	Number	Street			
	City		State	Zip Code	
s	-	or Schedule G to fill out Colu			ficial Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	Zip Code	
3.2					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	Zip Code	
3.3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	Zip Code	

Official Form 106H Record # 718652 Schedule H: Your Codebtors Page 1 of 1

			DOGDINE F	<u>Paue 32</u> 01 39
Fill in this ir	nformation to identi	fy your case:		
Debtor 1	Amanda	Rose	Gardner	_
	First Name	Middle Name	Last Name	
Debtor 2				_
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Case Numbe		the : <u>NORTHERN DISTRICT (</u>	OF ILLINOIS	Check if this is:
(If known)				An amended filing
				ı 😑 🤻
				A supplement showing post-petition
				chapter 13 income as of the following date
fficial F	orm 106I			MM (DD (NOOV
	<u> </u>			MM / DD / YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Describe Employment									
1.	Fill in your employment information	Debtor 1		Debtor 2 or non-filling spouse						
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	X Employed Not employed	1	Employed Not employed					
	Include part-time, seasonal, or self-employed work.	Occupation	Admin Assistant							
	Occupation may Include student or homemaker, if it applies.	Employers name	Apartment Realty	Advisors						
		Employers address	500 W Monroe St.	STE 2900						
			Chicago, IL 60661	 [,					
		How long employed there?	4 months							
Pa	Part 2: Give Details About Monthly Income									
	Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.									
				For Debtor 1	For Debtor 2 or non-filing spouse					
2.	List monthly gross wages, salary and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.			\$4,253.32	\$0.00					
3.	Estimate and list monthly overtime pay.			\$0.00	\$0.00					
4.	Calculate gross income. Add line	e 2 + line 3.		\$4,253.32	\$0.00					

 Official Form 106I
 Record # 718652
 Schedule I: Your Income
 Page 1 of 2

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Document Rose Amanda Debtor 1 Case Number (if known) _ First Name Middle Name Last Name

				For Debtor 1		ebtor 2 or ing spouse	
	Copy	line 4 here	4.	\$4,253.32		\$0.00	
5. Li		payroll deductions:					
		ax, Medicare, and Social Security deductions	5a. 	\$931.26		\$0.00	
		landatory contributions for retirement plans	5b. —	\$0.00		\$0.00	
	5c. V	oluntary contributions for retirement plans	5c. —	\$0.00		\$0.00	
		Required repayments of retirement fund loans	5d. 	\$0.00		\$0.00	
		nsurance	5e.	\$334.94		\$0.00	
		Omestic support obligations	5f. 	\$0.00		\$0.00	
	_	Inion dues	5g. —	\$0.00		\$0.00	
		Other deductions. Specify:	5h. —	\$0.00		\$0.00	
		payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$1,266.20		\$0.00	
		te total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,987.12		\$0.00	
8. Lis		other income regularly received:					
	8a.	Net income from rental property and from operating a business,					
		profession, or farm					
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					
		monthly net income.	8a.	\$0.00		\$0.00	
	8b.	Interest and dividends	8b.	\$0.00		\$0.00	
	8c.	Family support payments that you, a non-filing spouse, or a	8c.	\$ 0.00		\$ 0.00	
		dependent regularly receive					
		Include alimony, spousal support, child support, maintenance, divorce					
		settlement, and property settlement.					
	8d.	Unemployment compensation	8d.	\$0.00		\$0.00	
	8e.	Social Security	8e.	\$0.00		\$0.00	
	8f.	Other government assistance that you regularly receive	8f.	\$0.00		\$0.00	
		Include cash assistance and the value (if known) of any non-cash					
		assistance that you receive, such as food stamps (benefits under the					
		Supplemental Nutrition Assistance Program) or housing subsidies.					
	•	Specify:					
	8g.	Pension or retirement income	8g. —	\$0.00		\$0.00	
	8h.	Other monthly income. Specify:	8h. —	\$0.00		\$0.00	
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9	\$0.00		\$0.00	
10.	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$2,987.12 +		\$0.00 =	\$2,987.12
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	<u> </u>	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	L	7000	42,001112
11.	Inclu other Do n	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are notify:	our dependent not available to				11. \$0.00
		the amount in the last column of line 10 to the amount in line 11. The res		•	l a a a P	_	12 62 007 40
		e that amount on the Summary of Schedules and Statistical Summary of Ce		s and Related Data, if i	applies	·	12. \$2,987.12
13.	x I	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	ır				

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every	FIII IN THIS I	nformation to identify y	our case:						
Cffficial Form 106J Schedule J: Your Expenses 12/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. PRITT: Describe Your Household 1. Is this a joint case? Yes. Describe Your Household 1. Is this a joint case? Yes. Describe Your Household? Yes. Describe Your line a separate household? Yes. Describe Your line a separate household? Yes. Describe Your line a separate household? Yes. Describe Your household In and Describe Your household? Do not state the dependents? Do not state the dependents? A so Do your expenses include a separate household? Yes. Describe Your dependents? A so Do your expenses include your dependents? Show your expenses include the property of the first this is a supplemental Schedule J. Check the box at the top of them and this in this spill-cause powers and show the following the first this is a supplemental Schedule J. Check the box at the top of them and this in this spill-cause powers and of such assistance and have included it on Schedule P. Your Income (official From 1061) A separate filling for Debtor 2 because Debtor 2 because Debtor 4 with your? Dependents and case number (if known). Answer every question the with your 2 because Debtor 2 because Debtor 4 with your? Dependents and case number (if known). Answer every question to the spill-cause of the power o	Debtor 2 (Spouse, if filing)	First Name	Middle Name Middle Name	Last Name	An amer	An amended filing A supplement showing post-petition chapter 13			
A separate filing for Debtor 2 because Debtor 2			NORTHERN DISTRICT C	F ILLINOIS	MM / DE) / YYYY			
Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every queeston. It is this a joint case? Yes. Doescribe Your Nousehold 2 Do you have dependents? No. Oot to line 2 Yes. Doebotro 2 itile in a separate household? Yes. Doebotro 2 must file a separate bousehold? Yes. Doebotro 2 must file a separate Schedule J. 2 Do you have dependents? Do not list Debtor 1 and Debtor 1 and Debtor 2 and sale the dependents. Do not sist the dependents' To names. 3 Do your expenses include expenses include expenses include expenses of people other than your yes so people other than your yes so people other than your yes so people other than your sepanses of people other than your sepanses of people other than your sepanses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable cide. In the copenses plat for with non-cash government assistance if you know the value of such assistance and have included it on Schedule J: Your Income (Official Form 106L) If not included in fine 4: 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in fine 4: 4. Recol estate taxes 4. S725.00 4. Properly homeowner's, or renter's insurance 4. S725.00 Fine the underly homeowner's, or renter's insurance 4. Color of the form and file in the second of the color of the form and file in the second of the color of the color of the form and file in the second of the color of the				_	— A senara	ate filing for Debtor	2 hecause Debtor 2		
Be so complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, stach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. In this a joint case?	Official F	orm 106J				=			
The state of the dependents' and the separate found from the top of any additional pages, write your name and case number (if known). Answer every quiestion.	Schedu	le J: Your Ex	(penses				12/14		
1. Is this a joint case? X No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Does Debtor 2 live in a separate household? Yes. Does Debtor 2 live in a separate household? Yes. Does Debtor 2 live in a separate Schedule J. 2. Do you have dependents?	-								
X No. Go to line 2. Yes. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. 3	Part 1:	Describe Your Househol	d						
Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. Daughter Daughter 3 3	X No.	Go to line 2. Does Debtor 2 live in a	·	e J.					
Debtor 2. each dependent		•		this information for		•			
expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$725.00 If not included in line 4: 4a. Real estate taxes 4a. \$0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses	Debtor Do not names.	2. state the dependents'	each depen		Daughter	3	X Yes X No		
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. \$100.00	expens	es of people other than							
expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$725.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses	Part 2:	Estimate Your Ongoing	Monthly Expenses						
any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$725.00 4d. \$725.00 4d. \$0.00 4d. \$0.00	expenses as the applicable Include expe	of a date after the bank e date. nses paid for with non-	ruptcy is filed. If this is a	supplemental <i>Schedule J</i> , once if you know the value	check the box at the top of the	form and fill in	Your expenses		
He not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$0.00 4d. \$0.00	4. The rer	ntal or home ownership	expenses for your resid	ence. Include first mortgage	payments and				
4a. Real estate taxes4a. \$0.004b. Property, homeowner's, or renter's insurance4b. \$0.004c. Home maintenance, repair, and upkeep expenses4c. \$100.00		_				4.	\$725.00		
4b. Property, homeowner's, or renter's insurance 4b. \$0.00 4c. Home maintenance, repair, and upkeep expenses 4c. \$100.00						4a	\$0.00		
			r renter's insurance						
4d. Homeowner's association or condominium dues 4d. \$190.00	4c. H	ome maintenance, repa	ir, and upkeep expenses			4c.	\$100.00		
	4d. H	omeowner's association	or condominium dues			4d.	\$190.00		

Schedule J: Your Expenses

Document Gardner Rose Amanda Debtor 1 Case Number (if known) _

btor 1	Amanda Rose Gardner Case Number (if			
	First Name Middle Name Last Name			
			Your expens	es
5.	Additional Mortgage payments for your residence, such as home equity loans	5.		\$0.0
	Utilities:	6a.		\$200.0
	6a. Electricity, heat, natural gas	6b.		\$0.0
	6b. Water, sewer, garbage collection			\$280.0
	6c. Telephone, cell phone, internet, satellite, and cable service	6c.	\$	φ200.0 0.0
	6d. Other. Specify:	6d.	Ψ	
	Food and housekeeping supplies	7.		\$500.0
	Childcare and children's education costs	8.		\$0.0
	Clothing, laundry, and dry cleaning	9.		\$100.0
0.	Personal care products and services	10.		\$50.0
1.	Medical and dental expenses	11.		\$75.0
	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.		\$325.0
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.		\$0.0
4.	Charitable contributions and religious donations	14.		\$0.0
5.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.		\$0.0
	15b. Health insurance	15b.		\$0.0
	15c. Vehicle insurance	15c.		\$131.0
	15d. Other insurance. Specify:	15d.		\$0.0
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.		\$0.
7.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.		\$279.0
	17b. Car payments for Vehicle 2	17b.		\$0.0
	17c. Other. Specify:	17c.		\$0.0
	17d. Other. Specify:	17d.		\$0.0
8.	Your payments of alimony, maintenance, and support that you did not report as deducted			
	from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		\$0.0
9.	Other payments you make to support others who do not live with you.			
	Specify:	19.		\$0.0
) .	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.			
	20a. Mortgages on other property	20a.		\$ 0.
	20b. Real estate taxes	20b.	\$	0.0
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.0
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.0
	20e. Homeowner's association or condominium dues	20e.	\$	0.0

Official Form 106J Record # 718652 Schedule J: Your Expenses Page 2 of 3

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Debtor 1	Amar	ıda	Rose	Gardner	J	Case Number (if known)		
	First Na	me	Middle Name	Last Name				
21.	Other. S	pecify:					21.	\$0.00
22	Your mo	nthly expense:	Add lines 4 through 21.				22.	\$2,955.00
	The resu	t is your monthly	expenses.					
23.	Calculate	your monthly i	net income.					
	23a.	Copy line 12 (your comibined monthly i	ncome) from Schedule I.			23a.	\$2,987.12
	23b.	Copy your mo	nthly expenses from line	22 above.			23b. -	\$2,955.00
	23c.	-	monthly expenses from y	our monthly income.			23c.	\$32.12
		The result is y	our monthly net income.					
24.	Do you e	xpect an increa	se or decrease in your e	xpenses within the year after	you file this f	orm?		
			. , , ,	ur car loan within the year or d				
		payment to inci	ease or decrease because	se of a modification to the term	is of your mort	gage?		
	X No							
	Yes	Explain F	iere:					

 Official Form 106J
 Record #
 718652
 Schedule J: Your Expenses
 Page 3 of 3

Fill in this in	formation to identi	fy your case:	
Debtor 1	Amanda	Rose	Gardner
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for t	the : <u>NORTHERN</u> District of	ILLINOIS (State)
Case Number (If known)			
, ,			

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read correct.	the summary and schedules filed with this declaration and that they are true and
🗶 /s/ Amanda Rose Gardner	*
Signature of Debtor 1	Signature of Debtor 2
Date 01/16/2017	Date
MM / DD / YYYY	MM / DD / YYYY

Fill in this in	formation to identi	fy your case:	
Debtor 1	Amanda First Name	Rose Middle Name	Gardner Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for t	he : <u>NORTHERN</u> District of	
Case Number	r		(State)
(If known)			_

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

number (i	known). Answer every question.			
Part 1:	Give Details About Your Marital Status and Who	ere You Lived Before		
01. Wha	t is your current marital status?			
	larried			
_	ot married			
02 Duri ı	ng the last 3 years, have you lived anywhere othe	er than where you live no	w?	
Y	es. List all of the places you lived in the last 3 year	s. Do not include where y	ou live now.	
	Debtor 1	Dates Debtor 1	Debtor 2:	Dates Debtor 2
	Desitor 1	lived there	Debiol 2.	lived there
			Same as Debtor 1	Same as Debtor 1
-	10712 S. Kostner Ave	FROM 02/2014		
-	Oak Lawn, IL 60453	To 05/2014		
-				
prop	in the last 8 years, did you ever live with a spous erty states and territories include Arizona, Califo Wisconsin.) 0.			
	es. Make sure you fill out Schedule H: Your Codeb	otors (Official Form 106H).		
Part 2:	Explain the Sources of Your Income			
railt Ai	Explain the Sources of Your Income			

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Debtor 1 Amanda Rose Gardner Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$1,963 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, \$39,633 Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business Wages, commissions, Wages, commissions. \$42,152 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) \$300 Child Support From January 1 of current year until the date you filed for bankruptcy: Child Support \$2,370 (est.) For last calendar year: (January 1 to December 31, 2016) Child Support \$2,500 (est.) For last calendar year: (January 1 to December 31, 2015)

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Last Name

Amanda Rose Gardner Page 40 of 59

Case Number (if known)

Part 3:	List Certain Payments You Made Before You	Filed for Bankruptcy						
⁰⁶ Are ei	ither Debtor 1's or Debtor 2's debts primarily	consumer debts?						
□N	No. Neither Debtor 1 nor Debtor 2 has primarily "incurred by an individual primarily for a pers During the 90 days before you filed for bank	onal, family, or househ	old purpose."		,			
	☐ No. Go to line 7.							
*	Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.							
■ Y	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?							
	No. Go to line 7.							
	Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
		Dates of payments	Total amount paid	Amount you still o	we Was this payment for			
	Chase AUTO Po Box 901003 Ft Worth, TX 76101	Monthly	\$272	<u>\$13,892</u>	 Mortgage Car Credit card Loan repayment Suppliers or vendors Other 			
	US BANK HOME Mortgage 4801 Frederica St Owensboro, KY 42301	Monthly	\$538	\$43,450	Mortgage Car Credit card Loan repayment Suppliers or vendors Other			
Inside corpor agent, such a	n 1 year before you filed for bankruptcy, did you ers include your relatives; any general partners; prations of which you are an officer, director, perst, including one for a business you operate as a as child support and alimony.	relatives of any genera son in control, or owner	I partners; partnerships of r of 20% or more of their v	which you are a genera oting securities; and any	managing			
■ No	o. es. List all payments to an insider.	Dates of payment		Amount you still owe	Reason for this payment			

Debtor 1

First Name

Middle Name

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	Amanua	Ruse	Garunei		Case Number (If known)		
	First Name	Middle Name	Last Name					
an	insider?	led for bankruptcy, did yo	,	or transfer any property o	n account of a debt tha	t benefited		
	No.							
	Yes. List all payments	to an insider.						
	•		Dates of	Total amount	Amount you still	Reason fo	or this payment	
			payment	paid	owe	Include ci	reditor's name	
Part :	All Identify Legal act	ions, Repossessions, and	Foreclosures					
		led for bankruptcy, were		uit court action or admin	istrative proceeding?			
Lis		ding personal injury cases				ort or custody	,	
	No.							
	Yes. Fill in the details.							
			Nature of the case	Court or a	agency		Status of the case	
Ch	eck all that apply and fi	led for bankruptcy, was a l in the details below.	iny of your property repo	ossessed, foreclosed, gal	rnished, attached, seize	ed, or levied?		
_	No. Go to line 11							
L	Yes. Fill in the informa	tion below.						
	•	u filed for bankruptcy, di ent because you owed a		ng a bank or financial in	stitution, set off any a	mounts from	your accounts	
	No. Go to line 11							
F	Yes. Fill in the informa	tion below.						
		filed for bankruptcy, was	any of your property i	n the possession of an	assignee for the benef	it of creditors	i, a	
	= =	a custodian, or another		·	J		•	
	No.							
	Yes.							
Part	List Certain Gifts	and Contributions						
3 Wi	thin 2 years before you	ı filed for bankruptcy, di	d you give any gifts wit	th a total value of more	than \$600 per person?	•		
	No.							
	Yes. Fill in the details	for each gift.						
4 Wi	thin 2 years before you	ı filed for bankruptcy, di	d you give any gifts or	contributions with a tot	al value of more than \$	600 to any ch	narity?	
	I No					_	-	
	No.							
L	Yes. Fill in the details	or each gift.						
Part	List Certain Losse	PS						
	thin 1 year before you mbling?	filed for bankruptcy or s	ince you filed for bankı	ruptcy, did you lose any	rthing because of theft	, fire, other di	saster, or	
	No.							
	Yes. Fill in the details	for each gift.						
	Describe the property	vou lost and how	Describe any insu	rance coverage for the I	oss D	ate of your	Value of property	
	the loss occurred	•		t that insurance has pa		ss	lost	
		on her home	Flood		10	/15/2016	£7,000	
	Debtor has a flooding	10/15/2016						
	Debtor has a flooding Flooding damagaged				10	13/2010	_ \$7,000	
	Flooding damagaged	the floor, cabinets,				13/2010	\$7,000	
	_	the floor, cabinets,				13/2010	\$7,000	
	Flooding damagaged	the floor, cabinets,				113/2010	\$7,000	
	Flooding damagaged	the floor, cabinets,				13/2010	\$7,000	
	Flooding damagaged	the floor, cabinets,				13/2010	\$7,000	

Case 17-01637 Doc 1 Filed 01/19/17 Entered 01/19/17 16:18:47 Desc Main Document Page 42 of 59 Amanda Rose Gardner Case Number (if known) _ First Name Middle Name Last Name **List Certain Payments or Transfers** Part 7: Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Geraci Law L.L.C. \$1,250.00 55 E. Monroe Street #3400 Chicago,IL 60603 **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Credit Counseling Services Hananwill Credit Counseling 2016 \$25.00 115 N. Cross St. Robinson, IL 62454 17 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No. Yes. Fill in the details. 18 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No. Yes. Fill in the details for each gift. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details for each gift.

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No.

Yes. Fill in the details.

Last 4 digits of account number

Type of account or instrument Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

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Gardner

Case Number (if known) First Name Middle Name Last Name 21 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still 22 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No. Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? **Identify Property You Hold or Control for Someone Else** Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Value **Give Details About Environmental Information** Part 10: For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24 Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No. Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 25 Have you notified any governmental unit of any release of hazardous material? No. Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 26 Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Nature of the case Status of the case Court or agency Give Details About Your Business or Connections to Any Business Part 11: 27 Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation

Amanda

Debtor 1

Rose

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Debtor 1	Amanda	Rose	Gardner	Case Number (if known)
DCDIOI 1	First Name	Middle Name	Last Name	Case National (it known)
	No. None of the abo	ove applies. Go to Part 12.		
	Yes. Check all that	apply above and fill in the det	tails below for each busine	ess.
	thin 2 years before yetitutions, creditors,		you give a financial stat	ement to anyone about your business? Include all financial
	No.	_		
Ц	Yes. Fill in the deta	ils. Date is:	haus	
Part 12	2 . Sign Below	Dute 10	5454	
. art i	Sign Below			
×			_ 🗴	- College
	Signature of Debto	r 1	Signa	ture of Debtor 2
	Date 01/16/2017		Date	
	MM / DD /			MM / DD / YYYY
Did	vou attach additions	al names to Your Statement	of Financial Affairs for In	dividuals Filing for Bankruptcy (Official Form 107)?
_		ar pages to rour otatement	or r manetar Arian 3 for m	arriadas / ming for Bankraptey (Cinetai Form 161).
_	No Yes			
Ц	res			
Did	you pay or agree to	pay someone who is not an	attorney to help you fill	out bankruptcy forms?
	No			
	Yes. Name of perso	on		. Attach the Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119).

Eilod 01/10/17 Entered 01/19/17 16:18:47 Fill in this information to identify your case: Amanda Rose Gardner Debtor 1 First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the : <u>NORTHERN DISTRICT OF ILLINOIS EASTERN</u> DIVISION District of ILLINOIS Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- \blacksquare you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors,

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

write your name and case number (if known).

information below	-	Who Have Claims Secured by Property (Official Form 106D	,
Identify the credit	or and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Description of property securing debt:	Chase AUTO 2013 Hyundai Tucson with over 60,000 miles	 ☐ Surrender the property ☐ Retain the property and redeem it ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	■ No □ Yes
Creditor's name: Description of property securing debt:	Illinois Housing Development Authority 4716 West 106th Place Unit 3C Oak Lawn IL 60453 - Primary Residence	 ☐ Surrender the property ☐ Retain the property and redeem it ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	■ No □ Yes
Creditor's name: Description of property securing debt:	US Bank Home Mortgage 4716 West 106th Place Unit 3C Oak Lawn IL 60453 - Primary Residence	☐ Surrender the property ☐ Retain the property and redeem it ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	□ No ■ Yes
Creditor's name: Description of property securing debt:		Surrender the property Retain the property and redeem it Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	□ No □ Yes

Amanda Case 17-01637

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Document Page 46 of 99 Pumber (if known)

Page 46 of 99 Pumber (if known)

Desc Main

First Name

List Your Unexpired	l Personal	Property	Leases
---------------------	------------	----------	--------

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For any unexpired personal property lease that you listed in Schedule G: Executor	
fill in the information below. Do not list real estate leases. Unexpired leases are lea	
ended. You may assume an unexpired personal property lease if the trustee does r	ıot assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	☐ No
Lessor s name.	
Description of leased	Yes
property:	
p.opo.ty.	
Lessor's name:	□ No
Description of leased	Yes
property:	
Lessor's name:	□No
	Yes
Description of leased	□ res
property:	
Lessor's name:	□No
	 ∐Yes
Description of leased	
property:	
Lessor's name:	□No
	□Yes
Description of leased	
property:	
Loggaria nama:	□No
Lessor's name:	<u> </u>
Description of leased	□Yes
property:	
Lessor's name:	□ No
	Yes
Description of leased	⊔ Yes
property:	
Sim Palau	
Part 3: Sign Below	
Inder penalty of perjury, I declare that I have indicated my intention about any prop	erty of my estate that secures a debt and any
personal property that is subject to an unexpired lease.	
🗶 /s/ Amanda Rose Gardner	
Signature of Debtor 1 Signature of De	btor 2
Date Dated: 01/16/2017 Date	

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In r	re								
Am	anda Rose	Gardner /	Debtor				Case No:		
							Chapter:	Chapter 7	
			DISCLOSUI	DE OE COM	IDENS ATION (OF ATTORNEY	EOD DEE	OTOD	
	npensation p	oaid to me v	§ 329(a) and Fed. Bank within one year before the on behalf of the debtor(kr. P. 2016(b) ne filing of th), I certify that I e petition in ban	am the attorney for	or the aboved to be paid	re named debtor(d to me, for servi	ices
	For legal	services, I l	nave agreed to accept		\$1,250.00				
	Prior to th	ne filing of	this statement I have rec	ceived	\$1,250.00				
	Balance D)ue			\$0.00				
2.	The source	e of the con	npensation paid to me w	as:					
	Deb	otor(s)	Other: (specify))					
3.	The source	e of comper	nsation to be paid to me	is:					
	Del	btor(s)	Other: (specify))					
4.		e not agreed y law firm.	d to share the above-disc	closed compe	ensation with any	y other person unl	less they ar	re members and a	issociates
		y law firm.	share the above-disclose A copy of the agreemen						
5.	In return for case, inclu		e-disclosed fee, I have a	greed to rend	ler legal service	for all aspects of	the bankru	ptcy	
	_		lebtor' s financial situation	on, and rende	ering advice to the	he debtor in determ	mining who	ether to file a pet	ition in
		ruptcy;	eri e		0.00:				
	b. Prepa	ration and	filing of any petition, sci	hedules, state	ements of affairs	and plan which r	nay be reqi	uired;	
6.			e debtor(s), the above-de any work done post-fil		does not include	the following ser	vice:		
				_	ERTIFICATIO]
		I cert	ify that the foregoing is	a complete s	tatement of any	agreement or arra	ingement fo	or	
			presentation of the debto	or(s) in this b	ankruptcy proce	edings.			
		Date:	01/19/2017		s/ Merid Tekleh	naimanot Mekoni	nen		
		Date		S	Signature of Atto	orney			
					Geraci Law L.L	.C.			

718652 Page 1 of 1 Record #

Name of law firm

Case 17-01637 Doc 1 Filed 61/11/10/is Indiana (Wisconsin 16:18:47 Desc Main Geraci Law Book 11/10/is Indiana (Wisconsin 16:18:47 Desc Main Headquarters: 55 E. Monroe Street, #3400 Chicago, 11/60/60 1 866 928 (970 48 cuie 50 CORNER WWW.INFOTAPES.COM



Date: 1/16/2017

Consultation Attorney: MEK

Odilouitation		_		- Eli-a
Retainer	Agreement	Chapter 7	-	Pre-ming
1000000	•			

C to prepare to file a Chapter 7 bankruptcy petition in court. I agree to pay, by
Services before filing in Court: I retain Geraci Law L.L.C. to prepare to file a Chapter 7 bankruptcy petition in court. I agree to pay, by
debit only, a flat fee for services before filing in court of \$ 1,250.00 } starting {} at \$ {} within 60 days of today. Bankruptcy is time-sensitivel and \$ {} will obtain from {
- I F - I - I I - I I - I I - I I - I I - I I - I
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may pay more than this simple as soon as you sign this contract. Work before signing is no charge.
- COOP AND THAT THE INTERPRETATION OF THE PROPERTY OF THE PROP
After we file your Chapter 7 bankruptcy in Court, we will advance your Court Cost of \$335, and the flat lee for down and pay a fee for our \$1445 & \$335 = \$ total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our \$1445 & \$335 = \$ total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our \$1445 & \$335 = \$ total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our \$1445 & \$335 = \$ total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our \$1445 & \$335 = \$ total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our \$1445 & \$335 & \$355 & \$3
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The flat fee for pre-filing work pays for: consultation after hiring us, (before retaining us is free) preparation petition and schedules, mail the flat fee for pre-filing work pays for: consultation after hiring us, (before retaining us is free) preparation petition and schedules, and including faxes, email the flat fee for pre-filing work pays for: consultation after hiring us, (before retaining us is free) preparation petition and schedules, and including faxes, email statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from your case in court.
The flat fee for pre-filing work pays for: constitution and the statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from your metallic filing your case in court. Excluded: appearance in any court or statements, web uploads and mail; office appointment to review and sign your petition; filing your case in court. Excluded: appearance in any court or attachments, web uploads and mail; office appointment to review and sign your petition; filing your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before and after we file your case in any court or pays for ALL services before any pays for ALL services before any pays for all the pays for ALL services before any pays for all the pays for ALL services before any pays for all the pays for ALL services before any pays for all the pays for ALL services before any pays for all the pays for
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choose to pay for our services billed nounly at \$75 services, and are deposited into our operating decomposited into our opera
client trust account. We will only related theather research to the count which may be assets in a Chapter 7.
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\sim
Date: 1/1/2017 (Joint Debtor)
Amanda Gardner (Debtor)
Date: 1 (Joint Debtor) Amanda Gardner (Debtor) Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 161112
X Maniamurcar — Attorney for the Debicitor, representation

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Amanda Rose Gardner / Debtor	Bankruptcy Docket #:
	Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 01/16/2017 /s/ Amanda Rose Gardner

Amanda Rose Gardner

X Date & Sign

Record # 718652 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Amanda Rose Gardner / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 01/16/2017	/s/ Amanda Rose Gardner	
	Amanda Rose Gardner	

Dated: 01/19/2017 /s/ Merid Teklehaimanot Mekonnen

Attorney: Merid Teklehaimanot Mekonnen

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Debtor 1	Amanda First Name	Rose Middle Name	Gardner Last Name	Case Number (if know	vn)
Part (s for Reporting Purpos			
16. V	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution	16a. Are your of as "incurred with as "incurred law of the ast of	debts primarily consumer deal by an individual primarily for a part to line 16b. To to line 17. debts primarily business debt a business or investment or throught to line 16c. To to line 17. pe of debts you owe that are not line interest and the part of th	bts? Consumer debts are defined ersonal, family, or household purposites? Business debts are debts that gh the operation of the business or consumer debts or business debts line 18. Itimate that after any exempt properunds will be available to distribute	ose." It you incurred to obtain It investment. It is excluded and
18.	How many creditors do you estimate that you powe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999	5,00	0-5,000 1-10,000 01-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
	How much do you estimate your assets to be worth?	\$50,001-\$1	00,000	00,001-\$10 million 000,001-\$50 million 000,001-\$100 million 0,000,001-\$500 million	□\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □More than \$50 billion
	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$1 \$100,001-\$	00,000	00,001-\$10 million 000,001-\$50 million 000,001-\$100 million 0,000,001-\$500 million	☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion
For y		I have examined correct.	this petition, and I declare under	penalty of perjury that the informat	tion provided is true and
		of title 11, United under Chapter 7. If no attorney repthis document, I I request relief in I understand mawith a bankrupto	I States Code. I understand the represents me and I did not pay or a have obtained and read the notice accordance with the chapter of the king a false statement, concealing case can result in fines up to \$2, 1341, 1519, and 3571.	re that I may proceed, if eligible, ur elief available under each chapter, agree to pay someone who is not a e required by 11 U.S.C. § 342(b). itle 11, United States Code, specific groperty, or obtaining money or p. 250,000, or imprisonment for up to	and I choose to proceed an attorney to help me fill out lied in this petition. property by fraud in connection 20 years, or both.

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	3000 -11 0-1		Document	Page 53 of 59
Fill in this i	nformation to identif	y your case:		
Debtor 1	Amanda First Name	Rose Middle Name	Gardner Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_
Case Numbi		ne: <u>NORTHERN</u> District o	of ILLINOIS (State)	Check if this is an amended filing
Declara	tion About	an Individual	Debtor's Scł	hedules 12
If two married	people are filing tog	ether, both are equally res	ponsible for supplying	3 correct information.
obtaining mor		aud in connection with a b		dules. Making a false statement, concealing property, or sult in fines up to \$250,000, or imprisonment for up to 20
	Sign Below			
Did	v or agree to hav so	moone who is NOT an atte	rney to help you fill ou	it hankruntey forms?

No Attach Bankruptcy Petition Preparer's Notice, Declaration, and Yes. Name of Person Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and MM / DD / YYYY

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Debtor 1	Amanda	Rose	Gardner	Case Number (if known)
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·
	hin 2 years before yo titutions, creditors, o		l you give a financial statement	to anyone about your business? Include all financial
	No.			
	Yes. Fill in the details	, the state of the		
		Date is	sued	·
Part 12	Sign Below			
18 U. X	S.C. §§ 152, 1341, 15	W	X Signature o	f Debtor 2
	Date 16/1	2017 YYY	Date	/ DD / YYYY
				·
Did y	ou attach additional	pages to Your Statement	of Financial Affairs for Individu	uals Filing for Bankruptcy (Official Form 107)?
	No	•		
\	/es		`;	
Did y	ou pay or agree to p	ay someone who is not an	attorney to help you fill out ba	inkruptcy forms?
	No.		•	
\ \	es. Name of person	i		Attach the Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119).

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Document Gardner Amanda

First Name	Middle Name	Last Name	
Part 2: List Your Unexpired	Personal Property Lease	1	
or any unexpired personal prop	erty lease that you lister	in Schedule G: Executory Contracts and Une	xpired Leases (Official Form 106G),
l in the information below. Do n	ot list real estate leases	. <i>Unexpired lease</i> s are leases that are still in ef	ffect; the lease period has not yet
nded. You may assume an unex	pired personal property	lease if the trustee does not assume it. 11 U.S.	C. § 365(p)(2).
Describe your unexpired pers	sonal property leases		Will the lease be assumed?
Lessor's name:		•	☐ No
Description of leased property:			☐ Yes
Lessor's name:			□ No
Description of leased property:			Yes
Lessor's name:			□ No
Description of leased property:	·		☐ Yes ·
Lessor's name:			□No
Description of leased property:			□Yes
Lessor's name:			□No
Description of leased property:			□Yes
Lessor's name:			
Description of leased property:			Yes
Lessor's name:			□ No
Description of leased property:			Yes
Part 3: Sign Below			
nder penalty of perium. I declare	that I have indicated m	y intention about any property of my estate tha	at secures a debt and any
ersonal property that is subject		y intension about any property of my estate tha	a secures a test and any

Signature of Debtor 1

Date Dated: MM: / DD / YYYY Signature of Debtor 2

MM / DD / YYYY

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DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signers and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

 (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filling of your bankruptcy case.

 (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director)

 (3). You did not wilfully intend to evade the tax.

 (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filling spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filling spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors, a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others. e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Tum condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.

18.	Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans.
The	e Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the
oan	nkruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in state, Federal or Bankruptcy laws before the case
_ =	ind in Court AND ME HAVE TO BEAD OUECK & MOVE CURE OUR RETITION IS ACQUIRATE IN

is liled in Court	AND WE HAVE TO KEAD,	CHECK, a MARIE SURE OUR PETITION IS ACCURATED.	
Dated: _	<u>/ // /2</u> 017	Omen li Ktell	X Date & Sign
		Amanda Rose Gardner	

Record # 718652 Asset Disclosure Page 1 of 1

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Amanda Rose Gardner / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Pated: 1 / 10 /2017 Amanda Rose Gardner

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

X Date & Sign

Record # 718652

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

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Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

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WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Amanda Rose Gardner

X Date & Sign

Dated: ___*| | | |*/2017

Attorney: Merid Teklehaimanot Mekonnen

D@ardnenent Page 59 Ofc59 Number (if known) Middle Name Last Name Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:.... For your spouse .. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 0.00 0.00 Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line10c. 395.00 0.00 10a. 0.00 0.00 10b 10c. Total amounts from separate pages, if any. 395.00 0.00 Calculate your total current monthly income. Add lines 2 through 10 for each 4,092.04 0.00 4,092.04 column. Then add the total for Column A to the total for Column B Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year, Follow these steps: 12a. 4,092.04 Multiply by 12 (the number of months in a year). x 12 12b. The result is your annual income for this part of the form. 12b. 49,104.48 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. IL Fill in the number of people in your household. 2 Fill in the median family income for your state and size of household. 65,659.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. X Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below I declare underpenalty of perjury that the information on this statement and in any attachments is true and correct. By signing here. Amanda Rose Gardner Date: /2017 If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

Filed 01/19/17

Doc 1

Case 17-01637

Amanda

Debtor 1

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